

**HOLLAND & KNIGHT LLP****FAX RECEIVED****APR 30 2003****GROUP 1600**

One Atlantic Center  
1201 West Peachtree Street, N.E.  
Suite 2000  
Atlanta, Georgia 30309-3400

404-817-8500  
404-881-0470 FAX

www.hklaw.com

**OFFICIAL****FACSIMILE**

Annapolis  
Atlanta  
Baltimore  
Boston  
Bridgeton  
Chicago  
Fort Lauderdale  
Jacksonville  
Lakeland  
Los Angeles  
Melbourne  
Miami  
New York  
Northern Virginia  
Orlando  
Portland  
Providence  
St. Petersburg  
San Antonio

San Francisco  
Seattle  
Tallahassee  
Tampa  
Washington, D.C.  
West Palm Beach

Holland & Knight LLC

International Offices:  
Caracas  
Helsinki  
Mexico City  
Rio de Janeiro  
São Paulo  
Tel Aviv  
Tokyo

\*Representative Offices

**TO:**

<b>Group 1600</b>	<b>Assistant Commissioner for Patents – Group 1600</b>	<b>703-872-9306</b>
<b>NAME</b>	<b>COMPANY/FIRM</b>	<b>FAX NUMBER</b>
<b>Washington</b>	<b>D.C.</b>	<b>703-308-1235</b>
<b>CITY</b>	<b>STATE</b>	<b>(TELEPHONE NUMBER)</b>

**FROM:**

<b>Zhaoyang Li</b>	<b>404-817-8531</b>	<b>24</b>
<b>NAME</b>	<b>TELEPHONE</b>	<b>TOTAL PAGES (Including Cover Sheet)</b>

**FOR THE RECORD:**

<b>DATE: April 28, 2003</b>	<b>URGENCY: <input type="checkbox"/> SUPER RUSH <input type="checkbox"/> RUSH <input type="checkbox"/> REGULAR</b>
-----------------------------	--

<b>FAXED BY:</b>	<b>FILE #: 78374.11</b>	<b>CLIENT NAME: PDC 119</b>
------------------	-------------------------	-----------------------------

<b>CONFIRMED: <input type="checkbox"/> YES <input type="checkbox"/> NO</b>	<b>NAME: Peggy Bailey</b>	<b>TIME:</b>
--	---------------------------	--------------

If you did not receive all of  
the pages or find that they  
are illegible, please call  
(404) 817-8500

**CONFIDENTIALITY NOTICE:** This facsimile, along with any documents, files, or attachments, may contain information that is confidential, privileged, or otherwise exempt from disclosure. If you are not the intended recipient or a person responsible for delivering it to the intended recipient, you are hereby notified that any disclosure, copying, printing, distribution or use of any information contained in or attached to this facsimile is strictly prohibited. If you have received this facsimile in error, please immediately notify us by facsimile or by telephone collect at the numbers stated above, and destroy the original facsimile and its attachments without reading, printing, or saving in any manner. Your cooperation is appreciated. Thank you.

**MESSAGE:**

**Applicants:** Solomon S. Steiner and Bryan R. Wilson

**Serial No.:** 09/766,362

**Art Unit:** 1615

**Filed:** January 19, 2001

**Examiner:** H. N. Sheikh

**For:** DRY POWDER FORMULATIONS OF ANTIHISTAMINE FOR NASAL ADMINISTRATION

ATL1 #562918 v1

PTO/SB/21 (01-03)

Approved for use through 04/30/2003. OMB 0551-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/766,362	
	Filing Date	January 19, 2001	
	First Named Inventor	Solomon S. Steiner	
	Art Unit	1615	
	Examiner Name	H. N. Sheikh	
Total Number of Pages in This Submission	23	Attorney Docket Number	PDC 119

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Zhaoyang Li, Esq., Reg. No. 46,872 Holland & Knight LLP	
Signature	Suite 2000, One Atlantic Center, 1201 West Peachtree Street, N.E.; Atlanta, GA 30309-3400	
Date	April 29, 2003	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: April 29, 2003		
Typed or printed	Peggy D. Bailey	
Signature	Peggy D. Bailey	Date April 29, 2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

PTO/SB/17 (01-03)

Approved for use through 04/30/2003, OMB 0651-0032  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL**  
**for FY 2003**

Effective 01/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ ) 0.00

**Complete if Known**

Application Number	09/766,362
Filing Date	January 19, 2001
First Named Inventor	Solomon S. Steiner et al.
Examiner Name	H. N. Sheikh
Art Unit	1615
Attorney Docket No.	PDC 119

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit Account Number  
50-1868Deposit Account Name  
Holland & Knight LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) during the pendency of this application☒ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 180	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$ )

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20	X	
Multiple Dependent Claims	-3**	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$ )

\*\*or number previously paid, if greater. For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 820*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 65	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(g)	
1808 180	1808 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 750	2810 375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ )

**SUBMITTED BY**Name (Print/Type) **Zhaoyang Li**Registration No.  
(Attorney/Agent)

46,872

(Complete if applicable)

Telephone (404) 817-8513

Signature

Date

April 29, 2003

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9198 (1-800-766-9199) and select option 2.

17/C

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Solomon S. Steiner and Bryan R. Wilson

Serial No.: 09/766,362

Art Unit: 1615

Ret  
5-3-03

Filed: January 19, 2001

Examiner: H. N. Sheikh

For: *DRY POWDER FORMULATIONS OF ANTIHISTAMINE FOR NASAL  
ADMINISTRATION*

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT AND RESPONSE TO OFFICE ACTION**

Sir:

In response to office action mailed on March 12, 2003, please amend the claims and consider the remarks as follows. It is believed that no additional fee is required with this submission. However, should an additional fee be required, the Commissioner is hereby authorized to charge the fee to Deposit Account No. 50-1868.